

### **Division of Water Resources**

National Pollutant Discharge Elimination System (NPDES)

# Application for Coverage Under General Permit NCG500000

Non-contact cooling water, boiler blowdown, cooling tower blowdown, condensate, and similar point source discharges.

FOR AGENCY USE ONLY									
Date Received									
Year M			Month		Day				
Certificate of Coverage									
N	С	G	5	(	0				
Check #					Amount				
Assigned To:									

## NOTICE OF INTENT

[Required by 15A NCAC 02H .0127(d)]; [term definition see 15A NCAC 02H .0103(19)]

(Please print or type)

	Mailing address of f	· · · · · · · · · · · · · · · · · · ·	n an cor	
	Company Name			
	Owner Name			
	Street Address			
	City	S	ate	ZIP Code
	Telephone #	F:	ax #	
	Email Address			
2)	<b>Location of facility</b>	roducing discharge:		
	Facility Name			
	Facility Contact			
	Street Address			
	City	Si	ate	ZIP Code
	County			
	County Telephone #	F:	ax #	
	-			
3)	Telephone # Email Address  Physical location in Please provide a narr	Fa		
	Telephone # Email Address  Physical location in Please provide a narr distance and direction	prmation: tive description of how to get to the facili	ty (use si	
	Telephone # Email Address  Physical location in Please provide a narr distance and direction  This NPDES permit	ormation: tive description of how to get to the facilial from a roadway intersection).	ty (use si	
	Telephone # Email Address  Physical location in Please provide a narr distance and direction  This NPDES permit	prmation: tive description of how to get to the facility from a roadway intersection).  application applies to which of the follows:	ty (use si	
<b>3</b> )	Telephone # Email Address  Physical location in Please provide a narr distance and direction  This NPDES permit  New [term definition of the content of the	prmation: tive description of how to get to the facility from a roadway intersection).  application applies to which of the follows:	ty (use su	treet names, state road numbers, an
4)	Telephone # Email Address  Physical location in Please provide a narr distance and direction  This NPDES permit  New [term definition Modification Please describe the new Image of the Ima	prmation: tive description of how to get to the facilian from a roadway intersection).  application applies to which of the following see 15A NCAC 02H .0103(16)] or Prop	ty (use su	treet names, state road numbers, ar
4)	Telephone # Email Address  Physical location in Please provide a narr distance and direction  This NPDES permit  New [term definition Modification Please describe the new Image of the Ima	prmation: tive description of how to get to the facility from a roadway intersection).  application applies to which of the following see 15A NCAC 02H .0103(16)] or Proposition:	ty (use su	treet names, state road numbers, ar

7)		scription of Discharge equired by <u>15A NCAC 02</u>						
	a)	a) Is the discharge directly to the receiving water? □ Yes □ No						
If no, submit a site map with the pathway to the potential receiving waters clearly marked tracing the pathway of the storm sewer to the discharge point, if the storm sewer is the of discharge.								
	b) Number of discharge points (ditches, pipes, channels, etc. that convey wastewater from the prope							
(	c)	What type of wastewater is discharged? Indicate which discharge points, if more than one.						
		□ Non-contact coolin	ig water	_	□ Discharge point(s) #:			
		□ Boiler blowdown		□ Discharge point(s) #:				
	□ Cooling Tower Blowdown		□ Discharge point(s) #:					
		□ Condensate		□ Discharge point(s) #:				
	☐ Other –Please Describe:		□ Discharge point(s) #:					
	d)	ns Per Day):						
		#1: Gi	PD #2:	GPD #3:	GPD #4:	GPD		
8)	<b>poi</b>		chemical added to separate sheet): [I Name: Name	to the wastewater fo	r treatment, per each separate sheet):  The treatment of the separate sheet is a separate sheet sheet is a separate sheet sh	te discharge		
	the	additive is required to b	be submitted with the	he application for the I				
9)		there any type of trea tling ponds, etc.)?	tment being prov	vided to the wastewa	ter before discharge (i.e., rete	ention ponds,		
		No						
	pac cal	ckage. Existing treatment culations) should be pro	nt facilities should wided to ensure that	be described in detail. at the facility can comp	on time, surface area, etc.) with Design criteria and operational of the upwith the requirements of the cient to meet the limits set by the	data (including General Permit,		
					ires submission of three (3) se lities must comply with the requ			

NCAC 2H .0138. If construction applies to this discharge, include the three sets of plans and specifications with this

application.

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10) Disc	charge Frequency: [Required by 15A NCAC 02H .0105(c)(1)]
· ·	The discharge is:   Continuous   Intermittent   Seasonal  i) If the discharge is intermittent, describe when the discharge will occur:
	ii) If seasonal check the month(s) the discharge occurs:  □ Jan □ Feb □ Mar. □ Apr □ May □ Jun □ Jul □ Aug. □ Sept. □ Oct. □ Nov. □ Dec.
b)	How many days per week is there a discharge?
c)	Please check the days discharge occurs: □ Sat. □ Sun. □ Mon. □ Tue. □ Wed. □ Thu. □ Fri.
11) Poll	<b>lutants:</b> [Required by <u>15A NCAC 02H .0105(c)(1)</u> ]
	ase list any known pollutants that are present in the discharge, per each separate discharge point (if licable, use separate sheet):
12) Rec	reiving Waters: [Required by 15A NCAC 02H .0105(c)(1)]
,	What is the name of the body or bodies of water ( <i>creek</i> , <i>stream</i> , <i>river</i> , <i>lake</i> , <i>etc.</i> ) that the facility wastewater discharges end up in? If the site wastewater discharges to a separate storm sewer system (4S), name the operator of the 4S ( <i>e.g. City of Raleigh</i> ).
b)	Stream Classification:

#### 13) Alternatives to Direct Discharge: [Evaluation required by G.S. § 143-215.1(b)(5)(a) and 15A NCAC 02H .0105(c)(2)]

Address the feasibility of implementing each of the following non-discharge alternatives

- a) Connection to a Municipal or Regional Sewer Collection System
- b) Subsurface disposal (including nitrification field, infiltration gallery, injection wells, etc.)
- c) Spray irrigation

The alternatives to discharge analysis should include boring logs and/or other information indicating that a subsurface system is neither feasible nor practical as well as written confirmation indicating that connection to a <u>POTW</u> is not an option. It should also include a present value of costs analysis as outlined in the Division's "<u>Engineering Alternatives Analysis (EAA) Guidance Document</u>."

#### **Additional Application Requirements:**

For new or proposed discharges, the following information must be included in triplicate with this application or it will be returned as incomplete. Per  $\underline{15A \ NCAC \ 02H \ .0105(c)}$ 

- a) 7.5 minute series USGS topographic map (or a photocopied portion thereof) with discharge location clearly indicated.
- b) Site map, if the discharge is not directly to a stream, the pathway to the receiving stream must be clearly indicated. This includes tracing the pathway of a storm sewer to its discharge point.
- c) If this application is being submitted by a consulting engineer *or engineering firm*), include documentation from the applicant showing that the engineer (*or Firm*) submitting the application has been designated an authorized Representative of the applicant, per 15A NCAC 02H .0138(b)(1).
- d) Final plans for the treatment system (*if applicable*). The plans must be signed and sealed by a North Carolina registered <u>Professional Engineer</u> and stamped "Final Design-Not released for construction," per <u>15A NCAC 02H .0139</u>.

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#### **CERTIFICATION**

I certify that I am familiar with the information contained in this application and that to the best of my knowledge and belief such information is true, complete, and accurate.

Printed Name of Person Signing:	
Title:	
(Please review <u>15A NCAC 02H .0106(e)</u> for authorized signing officials)	
(Signature of Applicant)	(Date Signed)
North Carolina General Statute § 143-215.6B provides that:	
Any person who knowingly makes any false statement representation, or cert plan, or other document filed or required to be maintained under this Artic who knowingly makes a false statement of a material fact in a rulemaking Article; or who falsifies, tampers with, or knowingly renders inaccurate any required to be operated or maintained under this Article or rules of the Community of a Class 2 misdemeanor which may include a fine not to exceed the Section 1001 provides a punishment by a fine or imprisonment not more than	cle or a rule implementing this Article; or g proceeding or contested case under this recording or monitoring device or method mission implementing this Article, shall be en thousand dollars (\$10,000). 18 U.S.C.
* * * * *	
This application must be accompanied by a check or money order made payable to:	der for \$ <u>100.00</u> [per <u>G.S. § 143-215.3(a)(1b)</u> ]
NCDENR	
* * * * *	
Mail this application and one copy of the entire	package (with check) to:
NC DENR / DWR / Water Quality Peri 1617 Mail Service Cente Raleigh, North Carolina 27699 Attn: Charles Weaver	r
Final Checklist	
This application will be returned as incomplete, as allowed by $\underline{1}$ following items have been included:	5A NCAC 02H .0107(b), unless all the
☐ Complete application with all supporting documents (plus one co	py of entire package)
☐ Check or money order for \$100.00, payable to NCDENR	
☐ 3 copies of county map or USGS quad sheet with location of faci	lity clearly marked on map
☐ 3 sets of plans and specifications signed and sealed by a North Ca	arolina P.E.

Note: The submission of this document does not guarantee the issuance of an NPDES permit.

☐ Thorough responses to items 1-7 on this application

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